

December 30, 2002

TO: **Urmi Chattopadhyay**, Art Unit 3738
CP2, Room 2-D-20

FROM: Jeanne Horrigan, EIC-3700

JH

SUBJECT: Search Results for Serial #09/909101

Attached are the search results for the "Transluminal Mitral Annuloplasty," including results of prior art and inventor searches in foreign patent databases, and prior art searches in medical and general sci/tech non-patent databases.

In the results, a highlighted line marks the end of a search, including the search strategy, in a particular set of databases and the beginning of a new search in a different set of databases.

I tagged the items that seemed to me to be most relevant, but **I suggest that you review all of the results.**

Also attached is a "*Search Results Feedback Form*." Your feedback will help enhance our search services.

I hope these results are useful. Please let me know if you would like me to expand or modify the search or if you have any questions.

Accession # 83166

SEARCH REQUEST FORM

Scientific and Technical Information Center

Requester's Full Name: URMI CHATTOPADHYAY Examiner #: 78284 Date: 12/30/02
 Art. Unit: 3738 Phone Number: 308-8510 Serial Number: 09/909 101
 Mail Box and Bldg/Room Location: CP2 2D20 Results Format Preferred (circle): PAPER DISK E-MAIL

If more than one search is submitted, please prioritize searches in order of need.

Please provide a detailed statement of the search topic, and describe as specifically as possible the subject matter to be searched. Include the elected species or structures, keywords, synonyms, acronyms, and registry numbers, and combine with the concept or utility of the invention. Define any terms that may have a special meaning. Give examples or relevant citations, authors, etc., if known. Please attach a copy of the cover sheet, pertinent claims, and abstract.

Title of Invention: Transluminal Mitral Annuloplasty
 Inventors (please provide full names): Jonathan J. Langberg; Michael D. Lesh
Erik van der Burg

Earliest Priority Filing Date: 1/30/2001

For Sequence Searches Only Please include all pertinent information (parent, child, divisional, or issued patent numbers) along with the appropriate serial number.

- Consider claims 1-6
- Search specifically claim 1
- ex.: prosthesis = implant = stent = stents
- Search words are highlighted

Thanks,
 Urmi Chattopadhyay

STAFF USE ONLY

	Type of Search	Vendors and cost where applicable
Searcher: <u>JEANNE HARRIGAN</u>	NA Sequence (#)	STN
Searcher Phone: <u>305-5934</u>	AA Sequence (#)	Dialog <input checked="" type="checkbox"/>
Searcher Location: <u>CP2 2C07</u>	Structure (#)	Questel/Orbit <input checked="" type="checkbox"/>
Date Searcher Picked Up: <u>12/30</u>	Bibliographic <input checked="" type="checkbox"/>	Dr Link <input checked="" type="checkbox"/>
Date Completed: <u>12/30</u>	Litigation	Nexis/Nexis <input checked="" type="checkbox"/>
Searcher Prep & Review Time: <u>83</u>	Fulltext <input checked="" type="checkbox"/>	Sequence Systems <input checked="" type="checkbox"/>
Clerical Prep Time: <u>42</u>	Patent Family	WWW/Internet <input checked="" type="checkbox"/>
Online Time: <u>42</u>	Other	Other (specify)

9/7/1 (Item 1 from file: 73)
DIALOG(R)File 73:EMBASE
(c) 2002 Elsevier Science B.V. All rts. reserv.

02247759 EMBASE No: 1982040920

Immediate postoperative regurgitant malfunction of Bjork-Shiley aortic valve due to interfering Teflon ventricular septal defect repair:

Correction by rotation of prosthetic annulus

Wilcox W.D.; Plauth Jr. W.H.; Williams W.H.; Symbas P.N.

Dept. Ped., Emory Univ. Sch. Med., Atlanta, GA 30335 United States

American Heart Journal (AM. HEART J.) (United States) 1982, 103/1
(148-150)

CODEN: AHJOA

DOCUMENT TYPE: Journal

LANGUAGE: ENGLISH

A 12-year-old girl was admitted, for repair of a ventricular septal defect (VSD) complicated by aortic regurgitation (AR) secondary to recent bacterial endocarditis. The VSD was repaired with a Dacron patch, using Teflon felt pledgets along a very narrow superior rim. A No. 23 Bjork-Shiley valve was inserted with the major orifice directed toward the left **coronary sinus** and the minor orifice toward the ventricular septum. Valve malfunction resulting in severe AR was apparent within 3 days of insertion. Cardiac cineradiography permitted correct noninvasive assessment of valve malfunction. Incomplete diastolic closure of the **prosthetic** valve could be easily demonstrated from multiple angles, obviating the need for angiography. Postoperative cineradiography provided documentation of normal **prosthetic** valve excursion.

9/7/2 (Item 1 from file: 34)
DIALOG(R)File 34:SciSearch(R) Cited Ref Sci
(c) 2002 Inst for Sci Info. All rts. reserv.

05680351 Genuine Article#: WQ098 Number of References: 73

Title: Long-term management of atrial fibrillation

Author(s): Gallagher MM (REPRINT) ; Camm AJ

Corporate Source: ST GEORGE HOSP, SCH MED, DEPT CARDIOL SCI, CRANMER
TERRACE/LONDON SW17 0RE//ENGLAND/ (REPRINT)

Journal: CLINICAL CARDIOLOGY, 1997, V20, N4 (APR), P381-390

ISSN: 0160-9289 Publication date: 19970400

Publisher: CLINICAL CARDIOLOGY PUBL CO, PO BOX 832, MAHWAH, NJ 07430-0832

Language: English Document Type: ARTICLE

Abstract: In the past decade, catheter ablation techniques and **implantable** devices have **revolutionized** the treatment of ventricular arrhythmias, junctional arrhythmias, and atrial flutter. For most patients presenting with atrial fibrillation (AF), the treatment available today is similar to that used a century ago, although nonpharmacologic strategies of therapy have begun to emerge for selected cases. There have been important recent advances in our understanding of the pathophysiology of AF and its complications? and it may be possible to improve patient management by refinement of the way in which current drugs are used.

9/26,TI/1 (Item 1 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.

013547397

WPI Acc No: 2001-031603/200104

**Implantable cardiac stimulation lead for regulating contractions of heart
has elongated lead body with proximal and distal ends, electrical
connector, electrode, electrical conductor, and elongated tube or cable**

9/26,TI/2 (Item 2 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.

012612592

WPI Acc No: 1999-418696/199935

Stent for implantation into a body passage

9/26,TI/3 (Item 3 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.

011790729

WPI Acc No: 1998-207639/199818

**Retractable rotary control knob for electrical household appliances - has
cylindrical pin connected to knob-cap by thin rib formed as integral part
of plastic structure used for cap**

9/26,TI/4 (Item 4 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.

003619473

WPI Acc No: 1983-G7673K/198320

**Artificial heart - with groove and projection joining ventricle and
atrium with possibility of rotation**

?show files;ds;b348,349;exs;ds

File 350:Derwent WPIX 1963-2002/UD,UM &UP=200282

(c) 2002 Thomson Derwent

File 344:Chinese Patents Abs Aug 1985-2002/Nov

(c) 2002 European Patent Office

File 347:JAPIO Oct 1976-2002/Aug(Updated 021203)

(c) 2002 JPO & JAPIO

File 371:French Patents 1961-2002/BOPI 200209

(c) 2002 INPI. All rts. reserv.

Set	Items	Description
S1	255027	PROSTHES?S OR PROSTHETIC? OR STENT? ? OR IMPLANT? OR GRAFT- ??? OR APPLIANCE? ?
S2	221	(CORONARY OR CORONARIUS) (N) SINUS
S3	515	(CAVITY OR SINUS) (5N) (HEART OR CARDIAC OR CORONARY)
S4	2489955	ROTAT???? OR TWIST??? OR TURN??? OR REVOLV??? OR REVOLUTIO- N? ? OR PIVOT???
S5	1130	IC=A61F-002/24
S6	12	S1 AND S2:S3 AND S4
S7	1	S5 AND S6
S8	5	S1(S)S4 AND S2:S3
S9	4	S8 NOT S7

7/7/1 (Item 1 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.

014938381 **Image available**
WPI Acc No: 2002-759090/200282

Transluminal mitral annuloplasty performing method for heart, involves inserting catheter with prosthesis, into coronary veins and rotating component of prosthesis to exert compressive force on mitral valve annulus

Patent Assignee: BURG E V D (BURG-I); LANGBERG J J (LANG-I); LESH M D (LESH-I)

Inventor: BURG E V D; LANGBERG J J; LESH M D

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 20020103532	A1	20020801	US 2001774869	A	20010130	200282 B
			US 2001909101	A	20010719	

Priority Applications (No Type Date): US 2001774869 A 20010130; US 2001909101 A 20010719

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
US 20020103532	A1	23	A61F-002/24	Div ex application	US 2001774869

Abstract (Basic): US 20020103532 A1

NOVELTY - Transluminal **mitral annuloplasty** performing method for heart, involves inserting catheter, having a prosthesis, into the venous system. The prosthesis is transluminally advanced into the coronary sinus (22). A component of prosthesis is rotated to cause the prosthesis to exert a compressive force on the adjacent **mitral valve annulus**.

DETAILED DESCRIPTION - Transluminal **mitral annuloplasty** performing method for heart, involves inserting catheter, having a prosthesis, into the venous system. The prosthesis is transluminally advanced into the coronary sinus (22). A component of prosthesis is rotated to cause the prosthesis to exert a compressive force on the adjacent **mitral valve annulus**. The venous system is percutaneously accessed prior to the advancing step where accessing is done by accessing an internal angular, subclavian and femoral veins and the ongoing drug therapy is determined based on implantation hemodynamic function.

An INDEPENDENT CLAIM is included for a method of providing a therapeutic compressive force which involves securing device in arcuate configuration within coronary sinus.

USE - For performing transluminal **mitral annuloplasty** for remodeling an extra vascular anatomized structure in arterial system of heart.

ADVANTAGE - Treats **mitral** valvular insufficiency by lower morbidity and mortality rates than the current techniques. Provides a percutaneous, transluminal simple and implantable device that don't depend on prosthetic **valve** leaflets. Reduces the severity of **mitral** regurgitation and the size of the left ventricular cavity, thus reducing the **mitral** annulus and constraint of diastolic expansion without morbidity. Prevents device from slipping out of coronary sinus by providing anchors that are flaccid and flexible and minimizing the risk of erosion of device. Enables easy installation and removal. Prevents puncture of tissues.

DESCRIPTION OF DRAWING(S) - The figure shows a schematic view of heart with metro **annuloplasty** and cardiac reinforcement device positional with in coronary sinus and contiguous venous system.

Coronary sinus (22)

pp; 23 DwgNo 6/13

Derwent Class: B07; P32

International Patent Class (Main): A61F-002/24

?t7/26,ti/2

7/7/1 (Item 1 from file: 5)
DIALOG(R)File 5:Biosis Previews(R)
(c) 2002 BIOSIS. All rts. reserv.

13753631 BIOSIS NO.: 200200382452

Percutaneous mitral annuloplasty and cardiac reinforcement.

AUTHOR: Langberg Jonathan J (a); Lesh Michael D

AUTHOR ADDRESS: (a)Atlanta, GA**USA

JOURNAL: Official Gazette of the United States Patent and Trademark Office
Patents 1259 (2):pNo Pagination June 11, 2002

MEDIUM: e-file

ISSN: 0098-1133

DOCUMENT TYPE: Patent

RECORD TYPE: Abstract

LANGUAGE: English

ABSTRACT: A mitral **annuloplasty** and LV restriction device is designed to be transvenously advanced and deployed within the coronary sinus and in some embodiments other coronary veins. The device places tension on adjacent structures, reducing the diameter and/or limiting expansion of the mitral annulus and/or limiting diastolic expansion of the left ventricle. These effects may be beneficial for patients with dilated cardiomyopathy.

DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.

014763076

WPI Acc No: 2002-583780/200262

Medical system, for remodeling extravascular tissue structure, has
elongate body that may be moved from first to second configuration for
remodeling the mitral valve annulus proximate the coronary sinus

?show files;ds;b348,349

File 350:Derwent WPIX 1963-2002/UD,UM &UP=200282

(c) 2002 Thomson Derwent

File 347:JAPIO Oct 1976-2002/Aug(Updated 021203)

(c) 2002 JPO & JAPIO

File 371:French Patents 1961-2002/BOPI 200209

(c) 2002 INPI. All rts. reserv.

Set	Items	Description
S1	11	AU='LANGBERG J J'
S2	26	AU='LESH M D'
S3	4	AU='VAN DER BURG E':AU='VAN DER BURG E J'
S4	1	S1 AND S2 AND S3
S5	29	S1:S3 NOT S4
S6	734876	ANNULOPLASTY OR ANULOPLASTY OR VALVE? ? OR MITRAL
S7	2	S5 AND S6

fibrillation during permanent pacemaker implantation

During a 6-year period, six of 110 patients **implanted** with AAI pacemakers for sick sinus syndrome developed atrial fibrillation at the time of pacemaker **implantation** (5.5%). In all cases a passive fixation lead was sited in the right atrial appendage, its stability being ensured by **rotation** of the lead and phrenic nerve stimulation excluded by pacing at 10 V. One patient...

...intermittent atrial fibrillation. We conclude that in sick sinus syndrome, atrial fibrillation complicates AAI pacemaker **implantation** procedure in 5.5% of cases. As an alternative to an unplanned general anaesthetic to cardiovert the patient, it is reasonable to **implant** an atrial lead in the right atrial appendage in the expectation of a spontaneous reversion...

MEDICAL DESCRIPTORS:

*heart atrium fibrillation--complication--co; * **heart** atrium pacing; *sick sinus syndrome--therapy--th; *sinus node disease--therapy--th

13/3,K/5 (Item 5 from file: 73)

DIALOG(R)File 73:EMBASE

(c) 2002 Elsevier Science B.V. All rts. reserv.

06643394 EMBASE No: 1996308221

Interventional treatment modalities for atrial fibrillation

INTERVENTIONELLE BEHANDLUNGSTECHNIKEN VON VORHOFFLIMMERN

Osswald S.

Kardiologische Abteilung, Universitätskliniken, Kantonsspital, CH-4031

Basel Switzerland

Schweizerische Medizinische Wochenschrift (SCHWEIZ. MED. WOCHENSCHR.) (Switzerland) 1996, 126/41 (1732-1738)

CODEN: SMWOA ISSN: 0036-7672

DOCUMENT TYPE: Journal; Conference Paper

LANGUAGE: GERMAN SUMMARY LANGUAGE: GERMAN; ENGLISH; FRENCH

...experimental techniques. Among the rate-control procedures, AV-nodal ablation in conjunction with permanent pacemaker **implantation** and transcatheter radiofrequency modulation of the AV-node are clinically accepted techniques. In contrast, the...

...radiofrequency ablation of atrial fibrillation, a still highly investigational technique, may have the potential to **revolutionize** interventional therapy of atrial fibrillation in the future. For this to occur, however, the technique...

MEDICAL DESCRIPTORS:

atrioventricular conduction; conference paper; **heart** atrium pacing; human ; **sinus** rhythm

13/3,K/6 (Item 6 from file: 73)

DIALOG(R)File 73:EMBASE

(c) 2002 Elsevier Science B.V. All rts. reserv.

05101190 EMBASE No: 1992241406

Suppression of precursors of impending ventricular fibrillation by drugs retroinfusion in coronary sinus . Experimental investigation for a possible Automatic Implantable Pharmacological Cardioverter Defibrillator (AIPhCD)

Cammini L.; Furlanello F.; Perna A.M.; Vergara G.; Musante R.; Grassi G. ; Alcidì L.

USL 10 D, Centro Cardiologico 'Ulivella', Firenze Italy

New Trends in Arrhythmias (NEW TRENDS ARRHYTHMIAS) (Italy) 1991, 7/4 (855-863)

CODEN: NTARE ISSN: 0393-5302

DOCUMENT TYPE: Journal; Conference Paper

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

Suppression of precursors of impending ventricular fibrillation by drugs retroinfusion in coronary sinus . Experimental investigation for a possible Automatic Implantable Pharmacological Cardioverter Defibrillator (AIPhCD)

The algorithm of a possible Automatic Implantable Pharmacological Cardioverter Defibrillator (AIPhCD) is described. This new approach of Sudden Cardiac Death (SCD) originating...

...and drugs directly released in contact with the myocardial cells by the retroinfusion through the **coronary sinus** (CS). The aim of this study is to suppress ventricular arrhythmias, such as Sustained Ventricular...

...arrhythmias, restoring in a few seconds a steady sinus rhythm directly or after a short **cardiac** pacing. Steady **Sinus** Rhythm, in its **turn** , prevented or, at least, delayed the reappearance of induced Malignant Tachyarrhythmias. These results confirm the...

MEDICAL DESCRIPTORS:

* **coronary sinus** ; * **heart ventricle fibrillation--prevention--pc**; * **heart ventricle fibrillation--drug therapy--dt**; *precursor

13/3,K/7 (Item 7 from file: 73)
DIALOG(R) File 73:EMBASE
(c) 2002 Elsevier Science B.V. All rts. reserv.

02644994 EMBASE No: 1984163952

Massive coronary gas embolism managed by retrograde coronary sinus perfusion

Fundaro P.; Santoli C.

Division of Thoracic Surgery 'L. Sacco' Hospital, Milan Italy

Texas Heart Institute Journal (TEX. HEART INST. J.) (United States)

1984, 11/2 (172-174)

CODEN: THIJJD

DOCUMENT TYPE: Journal

LANGUAGE: ENGLISH

Massive coronary gas embolism managed by retrograde coronary sinus perfusion

A case of massive coronary air embolism occurred during cardiopulmonary bypass because the **rotation** of the pump suction line, which was connected to the aortic root vent needle, was...

...the heart and caused severe functional impairment. After completion of the procedure (double vein bypass **graft**), the patient could not be disconnected from bypass. However, successful management with temporary retrograde **coronary sinus** perfusion was quickly achieved.

MEDICAL DESCRIPTORS:

*coronary artery bypass **graft** ; *gas embolism

MEDICAL TERMS (UNCONTROLLED): coronary sinus perfusion

13/3,K/8 (Item 8 from file: 144) *duplicate of 13/3,K/9*
DIALOG(R) File 144:Pascal
(c) 2002 INIST/CNRS All rts. reserv.

14434108 PASCAL No.: 00-0092140

Global myocardial revascularization without cardiopulmonary bypass using innovative techniques for myocardial stabilization and perfusion

HARINDER SINGH BEDI; SURI A; MANINDER SINGH KALKAT; BHUPENDER SINGH SENGAR; MAHAJAN V; CHAWLA R; VED PRAKASH SHARMA

Department of Cardiac Surgery, Tagore Heart Care and Research Centre, Jalandhar, Punjab, India

Journal: The Annals of thoracic surgery, 2000, 69 (1) 156-164

Language: English

Background. In off-pump coronary bypass **grafting** (CABG), invasiveness is reduced but technically perfect anastomosis is jeopardized by cardiac motion and the...

...pump CABG. For cardiac stabilization, a combination of local pericardial stabilization sutures and lifting and **rotating** the heart by means of posterior pericardial sutures were used. For myocardial perfusion, a technique of retrograde **coronary sinus** perfusion by arterial blood from the ascending aorta was used. Results. Each patient received an average of 3.8 **grafts** (range 3 to 5). Complications included conversion to cardiopulmonary bypass (CPB) in 1 patient and...

... in the same patient. In all other patients we were able to perform a satisfactory **grafting** in all territories with no operative mortality. Rapid recovery allowed 95% of our patients to resume normal activity within 1 month. A pre-discharge **graft** angiogram in 35 patients showed 97.8% patency. Conclusions. These results suggest that off-pump...

English Descriptors: Bypass; Aortocoronary; **Graft** ; Technique; Human; Multiple; Coronary heart disease; Treatment; Treatment efficiency; Perfusion; Retrograde; **Coronary sinus** ; Stabilization; Myocardium; Morbidity; Mortality; Prognosis

13/3,K/9 (Item 9 from file: 155)
DIALOG(R) File 155:MEDLINE(R)

10576677 20118667 PMID: 10654506

Global myocardial revascularization without cardiopulmonary bypass using innovative techniques for myocardial stabilization and perfusion.

Bedi H S; Suri A; Kalkat M S; Sengar B S; Mahajan V; Chawla R; Sharma V P
Department of Cardiac Surgery, Tagore Heart Care and Research Centre,
Jalandhar, Punjab, India. bedi@jla.usnl.net.in

Annals of thoracic surgery (UNITED STATES) Jan 2000, 69 (1) p156-64,
ISSN 0003-4975 Journal Code: 15030100R

Comment in Ann Thorac Surg. 2000 Jul;70(1) 338-40; Comment in PMID
10921750

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

BACKGROUND: In off-pump coronary bypass **grafting** (CABG), invasiveness is reduced but technically perfect anastomosis is jeopardized by cardiac motion and the...

...pump CABG. For cardiac stabilization, a combination of local pericardial stabilization sutures and lifting and **rotating** the heart by means of posterior pericardial sutures were used. For myocardial perfusion, a technique of retrograde **coronary sinus** perfusion by arterial blood from the ascending aorta was used. RESULTS: Each patient received an average of 3.8 **grafts** (range 3 to 5). Complications included conversion to cardiopulmonary bypass (CPB) in 1 patient and...

... in the same patient. In all other patients we were able to perform a satisfactory **grafting** in all territories with no operative mortality. Rapid recovery allowed 95% of our patients to resume normal activity within 1 month. A pre-discharge **graft** angiogram in 35 patients showed 97.8% patency. CONCLUSIONS: These results suggest that off-pump...

13/3,K/10 (Item 10 from file: 155)
DIALOG(R) File 155:MEDLINE(R)

08901064 96259000 PMID: 8665008

Critical role of the sinuses of Valsalva in the durability of valved conduits.

Kumar S P; Kumar M N; Ali M L; Becker A; Duran C M

Department of Cardiovascular Diseases, King Faisal Specialist Hospital and Research Centre, Riyadh, Saudi Arabia.

Journal of heart valve disease (ENGLAND) Mar 1996, 5 (2) p160-7, ISSN 0966-8519 Journal Code: 9312096

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

... 1), dye mediated photooxidized bovine pericardium (Group 2), and glutaraldehyde treated bovine pericardium (Group 3) **implanted** in the right ventricular outflow tract of sheep. Groups 1, 2 and 3 had 11, 11 and four animals available for assessment out of 12, 18 and six **implantations** respectively. The valved conduits were explanted at varying intervals between one and 11 months. The conduit function was assessed with hemodynamic, echocardiographic and Doppler studies both at the time of **implantation** and sacrifice. The explanted conduit was studied macroscopically and subjected to histopathologic examination. RESULTS. The hemodynamic and echocardiographic studies at **implantation** showed very satisfactory results in all three groups. At the time of sacrifice, Group 1 ...

...wall was related to the degree of prominence of the sinuses of Valsalva, which in **turn** depended on the ability to shape the pericardium at the time of construction of the...

Descriptors: Bioprosthesis; * **Heart Valve Prosthesis**; *Pericardium --transplantation--TR; * **Sinus** of Valsalva; Cattle; Echocardiography; Hemodynamics; **Prosthesis** Design; Sheep; Tissue Preservation

13/3,K/11 (Item 11 from file: 155)
DIALOG(R) File 155:MEDLINE(R)

07867348 94004138 PMID: 8400930

Effects of spinal cord stimulation in angina pectoris induced by pacing and possible mechanisms of action.

Mannheimer C; Eliasson T; Andersson B; Bergh C H; Augustinsson L E; Emanuelsson H; Waagstein F

Department of Medicine, Ostra Hospital, Gothenburg, Sweden.

BMJ (Clinical research ed.) (ENGLAND) Aug 21 1993, 307 (6902) p477-80, ISSN 0959-8138 Journal Code: 8900488

Comment in BMJ. 1993 Aug 21;307(6902) 462; Comment in PMID 8400927; Comment in BMJ. 1993 Oct 9;307(6909):938; Comment in PMID 8241872; Comment in BMJ. 1993 Sep 18;307(6906):737; Comment in PMID 8280229

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

... treatment with spinal cord stimulation. Blood samples were drawn from a peripheral artery and the **coronary sinus**. SETTING--Multidisciplinary pain centre, department of medicine, Ostra Hospital, and Wallenberg Research Laboratory, Sahlgrenska Hospital, Gothenburg, Sweden. SUBJECTS--Twenty patients with intractable angina pectoris, all with a spinal cord stimulator **implanted** before the study. RESULTS--Spinal cord stimulation increased patients' tolerance to pacing (p < 0.001...

... comparable to that producing angina during the control recording, myocardial lactate production during control session **turned** into extraction (p = 0.003) and, on the electrocardiogram, ST segment depression decreased, time to...

... 0.01; p < 0.05, and p < 0.05, respectively). Spinal cord stimulation

also reduced **coronary sinus** blood flow ($p = 0.01$) and myocardial oxygen consumption ($p = 0.02$). At the maximum...

13/3,K/12 (Item 12 from file: 5)
DIALOG(R)File 5:Biosis Previews(R)
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06664869 BIOSIS NO.: 000087107046

CONTROL OF INTRAOPERATIVE HYPERTENSION WITH ISOFLURANE IN PATIENTS WITH CORONARY ARTERY DISEASE EFFECTS ON REGIONAL MYOCARDIAL BLOOD FLOW AND METABOLISM

AUTHOR: SAHLMAN L; MILOCCO I; APPELGREN L; WILLIAM-OLSSON G; RICKSTEN S-E
AUTHOR ADDRESS: DEP. ANESTHESIA INTENSIVE CARE, SAHLGREN'S HOSP., S-413 45 GOTHENBURG, SWED.

JOURNAL: ANESTH ANALG 68 (2). 1989. 105-111. 1989

FULL JOURNAL NAME: Anesthesia and Analgesia

CODEN: AACRA

RECORD TYPE: Abstract

LANGUAGE: ENGLISH

...ABSTRACT: blockers up to the morning of surgery were studied during elective coronary artery by-pass **grafting**. Systemic and pulmonary hemodynamics and regional (great cardiac vein, GCVF) myocardial blood flow and myocardial metabolic parameters were measured. In 10 patients, both GCVF and global (**coronary sinus**, CSF) myocardial blood flows were recorded. Measurements were made 1) after induction of anesthesia but...

...conclude that isoflurane may induce myocardial ischemia even in the absence of hypotension. This in **turn** may be caused by an isoflurane-induced reflex tachycardia and not necessarily redistribution of coronary...

13/3,K/13 (Item 13 from file: 34)
DIALOG(R)File 34:SciSearch(R) Cited Ref Sci
(c) 2002 Inst for Sci Info. All rts. reserv.

05507074 Genuine Article#: WD089 No. References: 13

Title: Arteriovenous access fistulae diminish cardiac reserve, anaerobic threshold and work capacity: A case for fistula closure in stable renal transplant recipients

Author(s): Agar JWM (REPRINT) ; Jackson TJ; Steinwedel JA; Corke CF; Appelbe AF

Corporate Source: GEELONG HOSP, DEPT RENAL MED, POB 281/GEELONG/VIC 3220/AUSTRALIA/ (REPRINT); GEELONG HOSP, DEPT INTENS CARE/GEELONG/VIC/AUSTRALIA/; GEELONG HOSP, DEPT CARDIOL/GEELONG/VIC/AUSTRALIA/

Journal: NEPHROLOGY, 1996, V2, N6 (NOV), P387-391

ISSN: 1320-5358 Publication date: 19961100

Publisher: BLACKWELL SCIENCE, 54 UNIVERSITY ST, P O BOX 378, CARLTON VICTORIA 3053, AUSTRALIA

Language: English Document Type: ARTICLE (ABSTRACT AVAILABLE)

...Abstract: patent arteriovenous fistula (AVF) in stable renal transplant recipients may be viewed as 'insurance' against late **graft** failure and a return to haemodialysis. A patent AVF may, however, exert significant chronic demand on cardiac output (CO) which may in **turn** adversely affect the prognosis of patients already at risk of cardiac disease. Doppler echocardiography and anaerobic...

...patent AVF resulting in a markedly reduced exercise efficiency. A patent AVF is ideal where **graft** survival is doubtful but, where long-term **graft** function is expected, the adverse effects of AVF patency, a chronic elevation in CO and...

Research Fronts: 95-1402 001 (RATE-ADAPTIVE PACING; EXERCISE TRAINING; CHRONOTROPIC RESPONSE; **SINUS** NODE DISEASE; CHRONIC **HEART** -FAILURE)

13/3,K/14 (Item 14 from file: 155)
DIALOG(R) File 155:MEDLINE(R)

04151246 83128745 PMID: 6600645

Nitrous oxide added to halothane reduces coronary flow and myocardial oxygen consumption in patients with coronary disease.

Moffitt E A; Sethna D H; Gary R J; Raymond M J; Matloff J M; Bussell J A
Canadian Anaesthetists' Society journal (CANADA) Jan 1983, 30 (1)
p5-9, ISSN 0008-2856 Journal Code: 0371163

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

... cent halothane were studied in 13 patients, before the surgical incision for coronary artery vein **grafts**. **Cardiac** output and **coronary sinus** blood flow were determined by thermodilution, along with haemodynamic measurements. Measurements 15 minutes after addition of nitrous oxide revealed a significant decrease in heart rate, arterial pressure, **cardiac** index, **coronary sinus** blood flow and myocardial oxygen consumption. There was a significant increase in **coronary sinus** lactate content, and a significant decrease, from 27 to 11 per cent, in myocardial lactate...

... were receiving 50 per cent oxygen, in the presence of hypotension. Nitrous oxide should be **turned** off when hypotension occurs in coronary patients.

13/3,K/15 (Item 15 from file: 94)

DIALOG(R) File 94:JICST-EPlus

(c)2002 Japan Science and Tech Corp(JST). All rts. reserv.

03162624 JICST ACCESSION NUMBER: 97A0459499 FILE SEGMENT: JICST-E

Patch Graft Aortoplasty for Repair of a Sacclar Ascending Aortic Aneurysm Due to Medial Degeneration: A Case Report.

YAMAGISHI I (1); ABE T (1); KURIBAYASHI R (1); SEKINE S (1); SEKI K (1);
SHIBATA Y (1); MATSUKAWA M (1); AIDA H (2)

(1) Akita Univ. School of Medicine, Akita, JPN; (2) Hiraka General
Hospital, Akita, JPN

Ann Thorac Cardiovasc Surg, 1997, VOL.3,NO.2, PAGE.129-132, FIG.4, REF.7

JOURNAL NUMBER: Y0501BAR ISSN NO: 1341-1098

UNIVERSAL DECIMAL CLASSIFICATION: 616.12-089

LANGUAGE: English COUNTRY OF PUBLICATION: Japan

DOCUMENT TYPE: Journal

ARTICLE TYPE: Short Communication

MEDIA TYPE: Printed Publication

Patch Graft Aortoplasty for Repair of a Sacclar Ascending Aortic Aneurysm Due to Medial Degeneration: A Case...

...ABSTRACT: scan showed pericardial effusion. Her DSA revealed a sacclar ascending aortic aneurysm around the right **coronary sinus** of Valsalva. Based on the radiographic findings, she was diagnosed with critical cardiac tamponade caused...

...the aortic valve was first replaced with a St. Jude Medical valve (23A) and in **turn**, repair of the ascending aortic aneurysm, aneurysmectomy and patch **graft** aortoplasty was carried out with a well-tailored knitted Dacron vascular **graft**. In the postoperative course, there were no major complications and DSA after surgery demonstrated an...

...DESCRIPTORS: heart valve **prosthesis** ; ...

...blood vessel **prosthesis** ;

...BROADER DESCRIPTORS: **prosthesis** ;

13/3,K/16 (Item 16 from file: 34)
DIALOG(R)File 34:SciSearch(R) Cited Ref Sci
(c) 2002 Inst for Sci Info. All rts. reserv.

01535378 Genuine Article#: HG048 No. References: 26

Title: **EFFECT OF VAGAL NERVE ELECTROSTIMULATION ON THE POWER SPECTRUM OF HEART-RATE-VARIABILITY IN MAN**

Author(s): KAMATH MV; UPTON ARM; TALALLA A; FALLEN EL

Corporate Source: MCMaster UNIV, CHEDOKE MCMaster HOSP, MED CTR, DEPT MED, 1200 MAIN ST W/HAMILTON L8N 3Z5/ONTARIO/CANADA/; MCMaster UNIV, CHEDOKE MCMaster HOSP, MED CTR, DEPT MED, 1200 MAIN ST W/HAMILTON L8N 3Z5/ONTARIO/CANADA/; MCMaster UNIV, CHEDOKE MCMaster HOSP, MED CTR, DEPT SURG/HAMILTON L8N 3Z5/ONTARIO/CANADA/

Journal: PACE-PACING AND CLINICAL ELECTROPHYSIOLOGY, 1992, V15, N2 (FEB), P 235-243

Language: ENGLISH Document Type: ARTICLE (Abstract Available)

...Abstract: heart rate autospectrum was determined in a 28-year-old epileptic male patient with an **implanted** vagal electrical stimulator. The stimulator was activated at 20 Hz, 300-mu-sec pulse, and...

...ratio increased from 0.64 to 1.99 ($P < 0.001$) after the stimulator was **turned** OFF. There was a dramatic increase in the LF peak power ($> 60\%$) and a corresponding decrease in the HF peak power ($> 65\%$) when the stimulator was **turned** OFF. These values were reversed when the stimulator was **turned** ON again. In the early morning and late evening hours, there was a significant rightward...

Research Fronts: 90-0464 004 (POWER SPECTRUM OF HEART-RATE-VARIABILITY; AUTONOMIC NERVOUS-SYSTEM; **CARDIAC** PARASYMPATHETIC TONE; NEURAL REGULATION; RESPIRATORY **SINUS** ARRHYTHMIA)

90-0424 001 (LATTICE ALGORITHMS; POWER SPECTRAL DENSITY; AUTOREGRESSIVE MODEL; LINEAR PREDICTION; ADAPTIVE FREQUENCY...

File 155:MEDLINE(R) 1966-2002/Nov W4
 File 144:Pascal 1973-2002/Dec W4
 (c) 2002 INIST/CNRS
 File 5:Biosis Previews(R) 1969-2002/Dec W4
 (c) 2002 BIOSIS
 File 6:NTIS 1964-2002/Dec W5
 (c) 2002 NTIS, Intl Cpyrght All Rights Res
 File 8:Ei Compendex(R) 1970-2002/Dec W4
 (c) 2002 Elsevier Eng. Info. Inc.
 File 99:Wilson Appl. Sci & Tech Abs 1983-2002/Nov
 (c) 2002 The HW Wilson Co.
 File 65:Inside Conferences 1993-2002/Dec W4
 (c) 2002 BLDSC all rts. reserv.
 File 73:EMBASE 1974-2002/Dec W4
 (c) 2002 Elsevier Science B.V.
 File 34:SciSearch(R) Cited Ref Sci 1990-2002/Dec W5
 (c) 2002 Inst for Sci Info
 File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
 (c) 1998 Inst for Sci Info
 File 94:JICST-EPlus 1985-2002/Oct W3
 (c) 2002 Japan Science and Tech Corp(JST)
 File 35:Dissertation Abs Online 1861-2002/Nov
 (c) 2002 ProQuest Info&Learning

Set	Items	Description
S1	1694050	PROTHES?S OR PROSTHETIC? OR STENT? ? OR IMPLANT? OR GRAFT- ??? OR APPLIANCE? ?
S2	18976	(CORONARY OR CORONARIUS) (N) SINUS
S3	40663	(CAVITY OR SINUS) (5N) (HEART OR CARDIAC OR CORONARY)
S4	1303259	ROTAT??? OR TWIST??? OR TURN??? OR REVOLV??? OR REVOLUTION? OR PIVOT???
S5	43	S1 AND S2:S3 AND S4
S6	31	RD (unique items)
S7	3	S6/2002
S8	28	S6 NOT S7
S9	2	S1(5N)S4 AND S8
S10	26	S8 NOT S9
S11	18	S1(S)S4 AND S8
S12	16	S11 NOT S9
S13	16	Sort S12/ALL/PD,D

13/7/1
DIALOG(R) File 155:MEDLINE(R)

08679238 96020448 PMID: 8581208

Velocity of closure of Bjork-Shiley Convexo-Concave mitral valves: effect of mitral annulus orientation and rate of left ventricular pressure rise.

Blick E F; Wieting D W; Inderbitzen R; Schreck S; Stein P D

EMTEC Corp., Oklahoma City, OK, USA.

Journal of heart valve disease (ENGLAND) Jul 1995, 4 Suppl 1 pS26-30;
discussion S30-1, ISSN 0966-8519 Journal Code: 9312096

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

The purpose of this study was to determine analytically the hemodynamic factors that affect the closing velocity of the disc of Bjork-Shiley convexo-concave (BSCC) prosthetic mitral valves. The motion of the BSCC disk was modelled by Newton's second law written in the form of a second order differential equation which expressed the instantaneous angle of the disc with respect to the valve ring as a function of the instantaneous pressure drop across the mitral valve, $\Delta P(t)$, and the angle of the pressure gradient vector acting upon the disc during closure. The disc closes in response to the negative **pressure** drop created by the crossover of left **atrial** and left ventricular (LV) pressures. The rate of closure depends on the rate of development of the pressure drop across the valve, $d\Delta P/dt$, which is largely dependent upon the rate of change of left ventricular pressure during isovolumic contraction, $LV\ dP/dt$. The closure rate is also strongly dependent on the initial angle of the pressure drop vector with respect to the disc. The disc was predicted to reach its highest velocity at the moment of impact, based on the Runge-Kutta solution. Modelling suggests that a high $LV\ dP/dt$ during valve closure or distorted LV geometry, causing the angle between the fully open disc and the pressure drop vector to shift, will cause the valve to have a high velocity at the moment of impact and may produce high impact loads.

Record Date Created: 19960320

?show files;ds;logoff

File 155:MEDLINE(R) 1966-2002/Nov W4

Set	Items	Description
S1	1056	ANNULOPLASTY OR ANULOPLASTY
S2	43	(RECONSTRUCT??? OR FORM??? OR REFORM???) (5N) (RING OR ANNULUS) (10N) (CARDIAC OR MITRAL) () VALVE? ?
S3	0	(RECONSTRUCT??? OR FORM??? OR REFORM???) (5N) (RING OR ANNULUS) (10N) BICUSPID () VALVE? ?
S4	232172	CATHETER? ? OR TUBE? ? OR TUBELIKE OR TUBING OR TUBUL? OR - CONDUIT? ?
S5	329902	PROSTHESIS OR STENT? ? OR IMPLANT??? OR PROSTHETIC? ? OR GRAFT???
S6	57520	SINUS
S7	134644	ROTAT??? OR TWIST??? OR TURN??? OR REVOLV??? OR REVOLUTION? OR PIVOT???
S8	0	S1:S2 AND S4 AND S5 AND S6 AND S7
S9	87372	ATRIUM OR ATRIA OR ATRIAL
S10	634534	COMPRESS??? OR SQUEEZ??? OR PRESS??? OR CONSTRICT??? OR PUSH???
S11	10105	S10(10N)S9
S12	1012	S5(5N)S7
S13	1	S11 AND S12

13/3,K/1 (Item 1 from file: 73)
DIALOG(R)File 73:EMBASE
(c) 2002 Elsevier Science B.V. All rts. reserv.

07910300 EMBASE No: 1999383617

Permanent cardiac pacing at the Sestre Milosrdnice University Hospital in 1997

Petrac D.; Radic B.; Gjurovic J.; Vukosavic D.; Hamel D.; Filipovic J.; Holjevac I.

Dr. D. Petrac, University Department of Medicine, Sestre Milosrdnice Univ. Hospital, Vinogradska c. 29, HR-10000 Zagreb Croatia
Acta Clinica Croatica (ACTA CLIN. CROAT.) (Croatia) 1999, 38/3 (165-170)

CODEN: ACLCE ISSN: 0353-9466

DOCUMENT TYPE: Journal; Article

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH; SERBOCROATIAN

NUMBER OF REFERENCES: 22

...at our pacemaker center in 1970. Since then, more than 3,000 pacemakers have been **implanted**. In this study, the present state of permanent cardiac pacing at our center was analyzed. In 1997, 159 first pacemaker **implantations** and 20 replacements were performed, i.e. 21% of a total of 774 first **implantations** performed in Croatia. Atrioventricular block (48%), paroxysmal atrial fibrillation (14%), and sick sinus syndrome (13%) were the leading indications for cardiac pacing, while hypertrophic cardiomyopathy had **turned** to be an indication in 2% of patients. Ventricular pacing was used in 44%, ventricular...

...sick sinus syndrome than in those with atrioventricular block (40% vs. 23%). Cardioverter-defibrillator was **implanted** in one patient only. The rate of complications was low, and none of the patients with first **implantation** in 1997 died. After the war in Croatia, the number of pacemaker **implantations** at our center has been on a continuous increase. However, the choice of pacing mode is still quite inappropriate in some 30% of patients, while the rate of cardioverter-defibrillator **implantation** is low. Greater financial support, better pacemaker choice, and appropriate education are required to improve...

MEDICAL DESCRIPTORS:

*atrioventricular block--therapy--th; * **heart** atrium fibrillation--therapy --th; *sick **sinus** syndrome--therapy--th; * **heart** atrium pacing; *heart ventricle pacing
university hospital; artificial heart pacemaker; **implantation** ; Croatia; cardioversion; defibrillation; human; male; female; major clinical study; adolescent; aged; child; adult; article

13/3,K/2 (Item 2 from file: 73)
DIALOG(R)File 73:EMBASE
(c) 2002 Elsevier Science B.V. All rts. reserv.

07676822 EMBASE No: 1999155871

Myocardial metabolism and hemodynamics during coronary surgery without cardiopulmonary bypass

Penttila H.J.; Lepojarvi M.V.K.; Kaukoranta P.K.; Kiviluoma K.T.; Ylitalo K.V.; Peuhkurinen K.J.

Dr. H.J. Penttila, Department of Anesthesiology, Oulu University Hospital, Kajaanintie 50, 90220 Oulu Finland
AUTHOR EMAIL: hannu.penttila@oulu.fi

Annals of Thoracic Surgery (ANN. THORAC. SURG.) (United States) 1999, 67/3 (683-688)

CODEN: ATHSA ISSN: 0003-4975

PUBLISHER ITEM IDENTIFIER: S0003497598013447

DOCUMENT TYPE: Journal; Article

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 19

Background. Although renewed interest has recently been shown in coronary artery bypass **grafting** without cardiopulmonary bypass, no reports are available on myocardial metabolism and hemodynamics during temporary coronary occlusion and **rotation** of the contracting heart. Methods. Changes in myocardial energy metabolism and hemodynamics were monitored in 12 patients undergoing elective coronary artery bypass **grafting** without cardiopulmonary bypass, and the postoperative efflux of creatine kinase-MB mass and troponin T...

...the second postoperative day, but otherwise there were no major complications. Conclusions. Coronary artery bypass **grafting** without cardiopulmonary bypass seems to be well tolerated as only minor changes in myocardial energy...

MEDICAL DESCRIPTORS:

*heart muscle metabolism; *coronary artery bypass **graft** ; *coronary hemodynamics
mean arterial pressure; **coronary sinus** ; energy metabolism;
electrocardiogram; anastomosis; **heart** infarction--complication--co;
treatment outcome; human; male; female; clinical article; adult; article;
priority journal

13/3,K/3 (Item 3 from file: 73)

DIALOG(R)File 73:EMBASE

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06799124 EMBASE No: 1997081594

Advances in pacing for the patient with sick sinus syndrome

Alagona P. Jr.

Dr. P. Alagona Jr., St. Joseph's Heart Institute, 272 Dr. Martin Luther King Boulevard, Tampa, FL 33607 United States

Current Opinion in Cardiology (CURR. OPIN. CARDIOL.) (United Kingdom)

1997, 12/1 (3-11)

CODEN: COPCE ISSN: 0268-4705

DOCUMENT TYPE: Journal; Review

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 114

...significant clinical manifestation of progressive sinus node dysfunction, is the most frequent indication for the **implantation** of permanent pacing systems in the United States. **Revolutionary** advances in pacemaker hardware and programmability now allow a careful tailoring of device, mode, and...

MEDICAL DESCRIPTORS:

* **heart** pacing; *sick **sinus** syndrome--complication--co; *sick sinus syndrome--therapy--th

13/3,K/4 (Item 4 from file: 73)

DIALOG(R)File 73:EMBASE

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06763149 EMBASE No: 1997044640

Blind atrial pacing for patients with sinus node disease who develop atrial fibrillation during permanent pacemaker implantation

Fyfe T.; MacIntyre P.D.; Robinson J.F.; Clark A.L.

T. Fyfe, Cardiology Department, Southern General Hospital NHS Trust, 1345 Govan Road, Glasgow G51 4TF United Kingdom

International Journal of Cardiology (INT. J. CARDIOL.) (Ireland) 1997, 58/2 (188-191)

CODEN: IJCDD ISSN: 0167-5273

PUBLISHER ITEM IDENTIFIER: S016752739602863X

DOCUMENT TYPE: Journal; Article

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 2

...atrial pacing for patients with sinus node disease who develop atrial

6/3,K/1 (Item 1 from file: 349)
DIALOG(R) File 349: PCT FULLTEXT
(c) 2002 WIPO/Univentio. All rts. reserv.

00369621 **Image available**

LOW PROFILE MANIPULATORS FOR HEART VALVE PROSTHESES
MANIPULATEURS A PROFIL PLAT POUR PROTHESES DE VALVULES CARDIAQUES

Patent Applicant/Assignee:

ST JUDE MEDICAL INC,

Inventor(s):

KRUEGER Kurt D,

GIRARD Michael J,

VANNEY Guy P,

Patent and Priority Information (Country, Number, Date):

Patent: WO 9709949 A1 19970320

Application: WO 96US14606 19960909 (PCT/WO US9614606)

Priority Application: US 95526530 19950911

Designated States: AL AM AT AU AZ BB BG BR BY CA CH CN CZ DE DK EE ES FI GB

GE HU IL IS JP KE KG KP KR KZ LK LR LS LT LU LV MD MG MK MN MW MX NO NZ

PL PT RO RU SD SE SG SI SK TJ TM TR TT UA UG UZ VN KE LS MW SD SZ UG AM

AZ BY KG KZ MD RU TJ TM AT BE CH DE DK ES FI FR GB GR IE IT LU MC NL PT

SE BF BJ CF CG CI CM GA GN ML MR NE SN TD TG

Publication Language: English

Fulltext Word Count: 10848

Main International Patent Class: **A61F-002/24**

Fulltext Availability:

Detailed Description

Detailed Description

... position for implantation.

In its simplest form, the heart valve holder,
and supported heart valve **prosthesis**, is capable of
being **pivoted** manually relative to a handle, so that the
holder can be manipulated as desired for **implantation**,
Implantations presently are being carried out by the use
of trocars or similar devices, such as...

...there is no excessive trauma to
the chest, More than one trocar can be used. **Pivoting**
the holder and retained heart valve **prosthesis** relative
to the handle permits moving the heart valve **prosthesis**
in an appropriate position within the chest **cavity**. The
valve holder and **heart valve prosthesis** can be **pivoted**
to a desired orientation with external manipulation such
as a separate tool inserted through a...

7/6/1 (Item 1 from file: 636)
03962458 Supplier Number: 50341463 (USE FORMAT 7 FOR FULLTEXT)
PRODUCT BRIEFS: FDA okays 1/3-size cochlear implant
August 1, 1998
Word Count: 2356

7/6/2 (Item 1 from file: 442)
00047058

Splenosis; A Cause of Massive Gastrointestinal Hemorrhage (CLINICAL NOTES
)

1989;
LINE COUNT: 00109 WORD COUNT: 01505
?show files;ds;logoff hold
File 95:TEME-Technology & Management 1989-2002/Dec W2
(c) 2002 FIZ TECHNIK
File 98:General Sci Abs/Full-Text 1984-2002/Nov
(c) 2002 The HW Wilson Co.
File 9:Business & Industry(R) Jul/1994-2002/Dec 27
(c) 2002 Resp. DB Svcs.
File 16:Gale Group PROMT(R) 1990-2002/Dec 27
(c) 2002 The Gale Group
File 160:Gale Group PROMT(R) 1972-1989
(c) 1999 The Gale Group
File 148:Gale Group Trade & Industry DB 1976-2002/Dec 27
(c)2002 The Gale Group
File 621:Gale Group New Prod.Annou.(R) 1985-2002/Dec 27
(c) 2002 The Gale Group
File 636:Gale Group Newsletter DB(TM) 1987-2002/Dec 30
(c) 2002 The Gale Group
File 441:ESPICOM Pharm&Med DEVICE NEWS 2002/Dec W3
(c) 2002 ESPICOM Bus.Intell.
File 20:Dialog Global Reporter 1997-2002/Dec 30
(c) 2002 The Dialog Corp.
File 15:ABI/Inform(R) 1971-2002/Dec 30
(c) 2002 ProQuest Info&Learning
File 88:Gale Group Business A.R.T.S. 1976-2002/Dec 20
(c) 2002 The Gale Group
File 442:AMA Journals 1982-2002/Jan B1
(c)2002 Amer Med Assn -FARS/DARS apply
File 444:New England Journal of Med. 1985-2002/Dec W5
(c) 2002 Mass. Med. Soc.
File 149:TGG Health&Wellness DB(SM) 1976-2002/Dec W3
(c) 2002 The Gale Group

Set	Items	Description
S1	869288	PROSTHES?S OR PROSTHETIC? OR STENT? ? OR IMPLANT? OR GRAFT- ??? OR APPLIANCE? ?
S2	780	(CORONARY OR CORONARIUS) (N) SINUS
S3	2963	(CAVITY OR SINUS) (5N) (HEART OR CARDIAC OR CORONARY)
S4	5553417	ROTAT???? OR TWIST??? OR TURN??? OR REVOLV??? OR REVOLUTIO- N? ? OR PIVOT???
S5	0	S1(5N)S4(S)S2:S3
S6	2	S1(S)S4(S)S2:S3
S7	2	RD (unique items)

4/7/1 (Item 1 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.

013981234 **Image available**
WPI Acc No: 2001-465448/200150

Intravascular prosthesis for remodelling an extravascular anatomical structure has adjustable elongated body deliverable and able to provide pressure within the vessel

Patent Assignee: MITRALIFE (MITR-N); MITRALIFE INC (MITR-N); LANGBERG J J (LANG-I); LESH M D (LESH-I)

Inventor: LANGBERG J J ; LESH M D ; VAN DER BURG E ; VAN DER BERG E
Number of Countries: 095 Number of Patents: 007

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
WO 200154618	A1	20010802	WO 2001US2823	A	20010129	200150 B
AU 200131219	A	20010807	AU 200131219	A	20010129	200174
US 20010044568	A1	20011122	US 2000494233	A	20000131	200176
			US 2001909193	A	20010719	
DE 10103955	A1	20011129	DE 1003955	A	20010130	200202
US 20020016628	A1	20020207	US 2000494233	A	20000131	200213
			US 2001968272	A	20011001	
US 6402781	B1	20020611	US 2000494233	A	20000131	200244
EP 1255505	A1	20021113	EP 2001903399	A	20010129	200282
			WO 2001US2823	A	20010129	

Priority Applications (No Type Date): US 2000494233 A 20000131; US 2001909193 A 20010719; US 2001968272 A 20011001

Patent Details:

Patent No	Kind	Lan Pg	Main IPC	Filing Notes
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WO 200154618	A1	E	59 A61F-002/02	
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Designated States (National): AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CR CU CZ DE DK DM DZ EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ PL PT RO RU SD SE SG SI SK SL TJ TM TR TT TZ UA UG US UZ VN YU ZA ZW

Designated States (Regional): AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW MZ NL OA PT SD SE SL SZ TR TZ UG ZW

AU 200131219	A		A61F-002/02	Based on patent WO 200154618
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US 20010044568	A1		A61F-002/02	Div ex application US 2000494233
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DE 10103955	A1		A61F-002/24	
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US 20020016628	A1		A61F-002/24	Cont of application US 2000494233
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US 6402781	B1		A61F-002/06	
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EP 1255505	A1	E	A61F-002/02	Based on patent WO 200154618
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Designated States (Regional): AL AT BE CH CY DE DK ES FI FR GB GR IE IT LI LT LU LV MC MK NL PT RO SE SI TR

Abstract (Basic): WO 200154618 A1

NOVELTY - The prosthesis (20) comprises an elongated body (66) with proximal and distal ends (42,44) adjustable between so a to provide a configuration that is deliverable in one part to the vessel (22), and another to exert a force within the vessel on to the extravascular tissue structure.

DETAILED DESCRIPTION - An INDEPENDENT CLAIM is also included for the method of treating from within the vein, that is associated with the patent's heart.

USE - For treatment of patients with dilated cardiomyopathy.

DESCRIPTION OF DRAWING(S) - The drawing shows the schematic illustration of the heart and the prosthesis

Prosthesis (20)

Elongated body (66)

Vessel. (22)

pp; 59 DwgNo 1/16

Derwent Class: P32

International Patent Class (Main): A61F-002/02; A61F-002/06; A61F-002/24

10/TI/1 (Item 1 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

MEDICAL SYSTEM AND METHOD FOR REMODELING AN EXTRAVASCULAR TISSUE STRUCTURE
METHODE ET SYSTEME MEDICAUX DE REMODELAGE D'UNE STRUCTURE TISSULAIRE
EXTRAVASCULAIRE

10/TI/2 (Item 2 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

MEDICAL DEVICE WITH SENSOR COOPERATING WITH EXPANDABLE MEMBER
MEDIZINISCHES GERAT MIT EINEM SENSOR IN KOOPERATION MIT EINEM AUSDEHNBAREN
TEIL
INSTRUMENT MEDICAL POSSEDANT UN CAPTEUR COOPERANT AVEC UN ELEMENT DILATABLE

10/TI/3 (Item 3 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

METHOD AND APPARATUS FOR LOCATING THE FOSSA OVALIS
PROCEDE ET APPAREIL DE LOCALISATION DE LA FOSSE OVALE

10/TI/4 (Item 4 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

QRST SUBTRACTION USING AN ADAPTIVE TEMPLATE FOR ANALYSIS OF TU WAVE
OBSCURED ATRIAL ACTIVITY
SOUSTRACTION QRST UTILISANT UN MODELE ADAPTATIF POUR L'ANALYSE DE
L'ACTIVITE AURICULAIRE MASQUEE PAR LES ONDES TU

10/TI/5 (Item 5 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

METHOD AND APPARATUS FOR CLOSING A BODY LUMEN
VERFAHREN UND VORRICHTUNG ZUR SCHLIESSUNG EINES KORPERLUMENS
TECHNIQUE ET DISPOSITIF POUR FERMETURE D'UNE LUMIERE ANATOMIQUE

10/TI/6 (Item 6 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

CATHETER POSITIONING SYSTEM
SYSTEM ZUM POSITIONIEREN EINES KATHETERS
SYSTEME DE PLACEMENT DE CATHETER

10/TI/7 (Item 7 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

TISSUE ABLATION DEVICE ASSEMBLY AND METHOD FOR ELECTRICALLY ISOLATING A
PULMONARY VEIN OSTIUM FROM AN ATRIAL WALL
VORRICHTUNG FOR ABLATION VON GEWEBE UND VERFAHREN ZUR ELEKTRISCHEN TRENNUNG
EINER LUNGENVENE VON EINER ATRIALEM WAND
ENSEMBLE DE DISPOSITIF D'ABLATION TISSULAIRE ET PROCEDE D'ISOLATION
ELECTRIQUE D'UN OSTIUM DE VEINE PULMONAIRE A PARTIR D'UNE PAROI ATRIALE

10/TI/8 (Item 8 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

POSITIONING SYSTEM FOR AN PULMONARY OSTIUM ABLATOR
POSITIONIERUNGSSYSTEM FUR EIN PULMONARES OSTIUM-ABLATIONSGERAT
SYSTEME DE POSITIONNEMENT D'UN INSTRUMENT D'ABLATION D'ORIFICE PULMONAIRE

10/TI/9 (Item 9 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

ATRIAL ABLATOR HAVING BALLOON AND SENSOR
ATRIALE ABLATIONSVORRICHTUNG MIT BALLON UND SENSOR
INSTRUMENT AURICULAIRE D'ABLATION DOTE D'UN BALLONNET ET D'UN CAPTEUR

10/TI/10 (Item 10 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

METHOD AND DEVICE FOR LEFT ATRIAL APPENDAGE OCCLUSION
METHODE UND GERAT ZUR OKKLUSION DES LINKEN ATRIUMAPPENDIX
PROCEDE ET DISPOSITIF POUR OCCLUSION DE L'AURICULE CARDIAQUE GAUCHE

10/TI/11 (Item 11 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

CARDIAC PACING LEAD AND DELIVERY SYSTEM
SONDE-ELECTRODE CARDIAQUE ET SYSTEME DE MISE EN PLACE

10/TI/12 (Item 12 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

TISSUE ABLATION SYSTEM AND METHOD FOR FORMING LONG LINEAR LESION
GEWEBE ABLATIONSSYSTEM UND METHODE ZUR SCHAFFUNG EINER AUSGEDEHNTEN,
LINEAREN GEWEBE -DEGRADATION
SYSTEME ET PROCEDE D'ABLATION TISSULAIRE PERMETTANT D'OBTENIR UNE LESION
LINEAIRE LONGUE

10/TI/13 (Item 13 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

Stent-graft deployment apparatus and method
Entfaltungs-vorrichtung und -verfahren fur ein Stent-Transplantat
Appareil et procede de deploiement d'un stent a greffer

10/TI/14 (Item 14 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

CIRCUMFERENTIAL ABLATION DEVICE ASSEMBLY AND METHOD
VORRICHTUNG UND VERFAHREN ZUR ZIRKUMFERENZIELLEN ABLATION
DISPOSITIF ET PROCEDE D'ABLATION CIRCONFERENCELLE

10/TI/15 (Item 15 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

CARDIAC TISSUE ABLATION DEVICE AND METHOD OF USE
VORRICHTUNG ZUR ABLATION VON HERZGEWEBE SOWIE ANWENDUNGSVERFAHREN
DISPOSITIF D'ABLATION DE TISSU CARDIAQUE ET PROCEDE D'UTILISATION

10/TI/16 (Item 16 from file: 348)
DIALOG(R) File 348:(c) 2002 European Patent Office. All rts. reserv.

METHOD, SYSTEM AND APPARATUS FOR DETERMINING PROGNOSIS IN ATRIAL
FIBRILLATION
METHODE, SYSTEME ET APPAREIL DE DETERMINATION D'UN PRONOSTIC EN FIBRILLATION
AURICULAIRE

10/TI/17 (Item 17 from file: 348)
DIALOG(R)File 348:(c) 2002 European Patent Office. All rts. reserv.

STENT-GRAFT DEPLOYMENT APPARATUS AND METHOD
ENTFALTUNGSVORRICHTUNG UND VERFAHREN FUR EIN STENT-TRANSPLANTAT
APPAREIL ET PROCEDE DE DEPLOIEMENT DE STENT A GREFFER

10/TI/18 (Item 18 from file: 349)
DIALOG(R)File 349:(c) 2002 WIPO/Univentio. All rts. reserv.

MEDICAL SYSTEM AND METHOD FOR REMODELING AN EXTRAVASCULAR TISSUE STRUCTURE
METHODE ET SYSTEME MEDICAUX DE REMODELAGE D'UNE STRUCTURE TISSULAIRE
EXTRAVASCULAIRE

10/TI/19 (Item 19 from file: 349)
DIALOG(R)File 349:(c) 2002 WIPO/Univentio. All rts. reserv.

SYSTEMS AND METHODS FOR ABLATING BODY TISSUE
DISPOSITIFS ET PROCEDES D'ABLATION DE TISSU ORGANIQUE

10/TI/20 (Item 20 from file: 349)
DIALOG(R)File 349:(c) 2002 WIPO/Univentio. All rts. reserv.

ENDOCARDIAL INFUSION CATHETER
CATHETER DE PERFUSION ENDOCARDIAQUE

10/3,AB/1 (Item 1 from file: 348)
DIALOG(R)File 348:EUROPEAN PATENTS
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01457497

**MEDICAL SYSTEM AND METHOD FOR REMODELING AN EXTRAVASCULAR TISSUE STRUCTURE
METHODE ET SYSTEME MEDICAUX DE REMODELAGE D'UNE STRUCTURE TISSULAIRE
EXTRAVASCULAIRE**

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PATENT (CC, No, Kind, Date):

WO 2002060352 020808

APPLICATION (CC, No, Date): EP 2002709306 020130; WO 2002US3136 020130

PRIORITY (CC, No, Date): US 774869 010130; US 265995 P 010201

DESIGNATED STATES: AT; BE; CH; CY; DE; DK; ES; FI; FR; GB; GR; IE; IT; LI;
LU; MC; NL; PT; SE; TR

EXTENDED DESIGNATED STATES: AL; LT; LV; MK; RO; SI

INTERNATIONAL PATENT CLASS: A61F-002/06

LANGUAGE (Publication,Procedural,Application): English; English; English

10/3,AB/5 (Item 5 from file: 348)
DIALOG(R)File 348:EUROPEAN PATENTS
(c) 2002 European Patent Office. All rts. reserv.

01282572

**METHOD AND APPARATUS FOR CLOSING A BODY LUMEN
VERFAHREN UND VORRICHTUNG ZUR SCHLIESSUNG EINES KORPERLUMENS
TECHNIQUE ET DISPOSITIF POUR FERMETURE D'UNE LUMIERE ANATOMIQUE**

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PATENT (CC, No, Kind, Date): EP 1225948 A1 020731 (Basic)
WO 200121247 010329

APPLICATION (CC, No, Date): EP 2000965226 000920; WO 2000US25840 000920

PRIORITY (CC, No, Date): US 399521 990920; US 447390 991122; US 444904
991122; US 482986 000111

DESIGNATED STATES: AT; BE; CH; CY; DE; DK; ES; FI; FR; GB; GR; IE; IT; LI;
LU; MC; NL; PT; SE

EXTENDED DESIGNATED STATES: AL; LT; LV; MK; RO; SI

INTERNATIONAL PATENT CLASS: A61M-029/00

NOTE:

No A-document published by EPO

LANGUAGE (Publication,Procedural,Application): English; English; English

10/3,AB/10 (Item 10 from file: 348)
DIALOG(R)File 348:EUROPEAN PATENTS
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01168811

METHOD AND DEVICE FOR LEFT ATRIAL APPENDAGE OCCLUSION
METHODE UND GERAT ZUR OKKLUSION DES LINKEN ATRIUMAPPENDIX
PROCEDE ET DISPOSITIF POUR OCCLUSION DE L'AURICULE CARDIAQUE GAUCHE
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PATENT (CC, No, Kind, Date): EP 1135068 A1 010926 (Basic)
WO 200027292 000518

APPLICATION (CC, No, Date): EP 99960236 991108; WO 99US26325 991108

PRIORITY (CC, No, Date): US 187200 981106

DESIGNATED STATES: AT; BE; CH; CY; DE; DK; ES; FI; FR; GB; GR; IE; IT; LI; LU; MC; NL

EXTENDED DESIGNATED STATES: AL; LT; LV; MK; RO; SI

INTERNATIONAL PATENT CLASS: A61B-017/08

NOTE:

No A-document published by EPO

LANGUAGE (Publication,Procedural,Application): English; English; English

10/3,AB/13 (Item 13 from file: 348)
DIALOG(R)File 348:EUROPEAN PATENTS
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01080961

Stent-graft deployment apparatus and method
Entfaltungs-vorrichtung und -verfahren fur ein Stent-Transplantat
Appareil et procede de deploiement d'un stent a greffer

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PATENT (CC, No, Kind, Date): EP 950385 A2 991020 (Basic)
EP 950385 A3 991027

APPLICATION (CC, No, Date): EP 99108795 961213;

PRIORITY (CC, No, Date): US 572436 951214; US 620273 960322

DESIGNATED STATES: AT; BE; CH; DE; DK; ES; FI; FR; GB; GR; IE; IT; LI; LU; MC; NL; PT; SE

RELATED PARENT NUMBER(S) - PN (AN):

EP 866677 (EP 96944295)

INTERNATIONAL PATENT CLASS: A61F-002/06; A61M-029/02

ABSTRACT EP 950385 A3

A stent or stent graft deployment apparatus or mechanism (320, 322) configured so that, when activated, the stent or stent graft (2) progressively expands in a direction from its first end which is proximally positioned to the deployment instrument, such as a percutaneous catheter, to its end which is distally positioned to the deployment instrument. The stent or stent graft deployment mechanism may include a tether or slip line configuration (306) that may minimize the

likelihood of snagging between the line and stent member. A method is also provided for deploying a stent or stent graft within a mammalian lumen which includes expanding the stent or stent graft in such a proximal to distal direction. The apparatus and method of the present invention may minimize the likelihood of the stent or stent graft from being displaced from the desired site before it is somewhat secured in the vessel during deployment. The deployment means can facilitate expansion in a downstream to upstream direction where fluid flow in the lumen is downstream.

ABSTRACT WORD COUNT: 171

NOTE:

Figure number on first page: 1

LANGUAGE (Publication,Procedural,Application): English; English; English
FULLTEXT AVAILABILITY:

Available Text	Language	Update	Word Count
CLAIMS A	(English)	9942	986
SPEC A	(English)	9942	5851
Total word count - document A			6837
Total word count - document B			0
Total word count - documents A + B			6837

10/3,AB/17 (Item 17 from file: 348)
DIALOG(R)File 348:EUROPEAN PATENTS
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00866923

STENT-GRAFT DEPLOYMENT APPARATUS AND METHOD
ENTFALTUNGSVORRICHTUNG UND VERFAHREN FUR EIN STENT-TRANSPLANTAT
APPAREIL ET PROCEDE DE DEPLOIEMENT DE STENT A GREFFER
PATENT ASSIGNEE:

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AT;BE;CH;DE;DK;ES;FI;FR;GB;GR;IE;IT;LI;LU;MC;NL;PT;SE)

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PATENT (CC, No, Kind, Date): EP 866677 A1 980930 (Basic)
WO 9721402 970619

APPLICATION (CC, No, Date): EP 96944295 961213; WO 96US19667 961213

PRIORITY (CC, No, Date): US 572436 951214; US 620273 960322

DESIGNATED STATES: AT; BE; CH; DE; DK; ES; FI; FR; GB; GR; IE; IT; LI; LU;
MC; NL; PT; SE

INTERNATIONAL PATENT CLASS: A61F-002/06; A61M-029/02;

NOTE:

No A-document published by EPO

LANGUAGE (Publication,Procedural,Application): English; English; English

10/3,AB/18 (Item 18 from file: 349)
DIALOG(R)File 349:PCT FULLTEXT
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00926672

MEDICAL SYSTEM AND METHOD FOR REMODELING AN EXTRAVASCULAR TISSUE STRUCTURE
METHODE ET SYSTEME MEDICAUX DE REMODELAGE D'UNE STRUCTURE TISSULAIRE
EXTRAVASCULAIRE

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Inventor(s):

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BIRDSALL Matthew J, 4012 Polled Hereford Drive, Santa Rosa, CA 95404, US,

LESH Michael D , 301 Monte Vista, Mill Valley, CA 94941, US

Legal Representative:

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Patent and Priority Information (Country, Number, Date):

Patent: WO 200260352 A1 20020808 (WO 0260352)

Application: WO 2002US3136 20020130 (PCT/WO US0203136)

Priority Application: US 2001774869 20010130; US 2001265995 20010201

Designated States: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU
CZ (utility model) DE (utility model) DK (utility model) DM DZ EC EE
(utility model) ES FI (utility model) GB GD GE GH GM HR HU ID IL IN IS JP
KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PH
PL PT RO RU SD SE SG SI SK (utility model) SL TJ TM TN TR TT TZ UA UG UZ
VN YU ZA ZM ZW

(EP) AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE TR

(OA) BF BJ CF CG CI CM GA GN GQ GW ML MR NE SN TD TG

(AP) GH GM KE LS MW MZ SD SL SZ TZ UG ZM ZW

(EA) AM AZ BY KG KZ MD RU TJ TM

Publication Language: English

Filing Language: English

Fulltext Word Count: 22792

English Abstract

A medical apparatus (40) and method suitable for remodeling a mitral valve annulus adjacent to the coronary sinus (22). The apparatus comprises an elongate body (66) having a proximal region (42) and a distal region (44). Each of the proximal (42) and distal (44) regions is dimensioned to reside completely within the vascular system. The elongate body (66) may be moved from a first configuration for transluminal delivery to at least a portion of the coronary sinus (22) to a second configuration for remodeling the mitral valve annulus proximate the coronary sinus (22). A forming element (56) may be attached to the elongate body (66) for manipulating the elongate body (66) from the first transluminal configuration to the second remodeling configuration. Further, the elongate body (320) may comprise a tube (325) having a plurality of transverse slots (330) therein.

French Abstract

L'invention concerne une methode et un appareil (40) medicaux appropries au remodelage d'un anneau mitral adjacent au sinus coronaire (22). Ledit appareil comprend un corps allonge (66) dote de regions proximale (42) et distale (44). Chacune desdites regions (42, 44) est dimensionnee pour se loger completement a l'interieur dudit systeme vasculaire. On peut deplacer ce corps allonge (66) d'une premiere position d'administration transluminale au niveau au moins d'une portion du sinus coronaire (22), a une seconde position de remodelage de l'anneau mitral a proximite du sinus coronaire (22). On peut attacher un composant (56) au corps allonge (66) de maniere a manipuler ledit corps allonge (66) de la premiere a la seconde position. En outre, ledit corps allonge (320) peut renfermer un tube (325) pourvu d'une pluralite de fentes transversales (330).

?show files;ds;b155,5,73,34,434

File 348:EUROPEAN PATENTS 1978-2002/Dec W03

(c) 2002 European Patent Office

File 349:PCT FULLTEXT 1979-2002/UB=20021226,UT=20021219

(c) 2002 WIPO/Univentio

Set	Items	Description
S1	8	AU='LANGBERG JONATHAN J'
S2	30	AU='LESH MICHAEL D'
S3	8	AU='VAN DER BURG ERIK':AU='VAN DER BURG ERIK J'
S4	1	S1 AND S2 AND S3
S5	1	PN='WO 200154618'
S6	1	S4 NOT S5 <i>a duplicate</i>
S7	36	S1:S3 NOT S4
S8	35	S7 NOT S5

S9

S10

35 IDPAT (sorted in duplicate/non-duplicate order)

20 IDPAT (primary/non-duplicate records only)

10/6/1 (Item 1 from file: 348)
00683469

An improved implantable lead having a steering distal guide tip.
Implantierbare Leitung mit einem als Richtstrahlführung dienenden distalen Ende.

Conducteur implantable a extremite distale servant de guide directionnel.
LANGUAGE (Publication,Procedural,Application): English; English; English
FULLTEXT AVAILABILITY:

Available Text	Language	Update	Word Count
CLAIMS A	(English)	EPAB95	276
SPEC A	(English)	EPAB95	4426
Total word count - document A			4702
Total word count - document B			0
Total word count - documents A + B			4702

10/6/2 (Item 2 from file: 348)
00319756

Soluble covering for cardiac pacing electrode.
Losliche Umhullung fur Herzschrittmacherelektroden.
Gaine soluble pour l'electrode d'un stimulateur cardiaque.

LANGUAGE (Publication,Procedural,Application): English; English; English
FULLTEXT AVAILABILITY:

Available Text	Language	Update	Word Count
CLAIMS B	(English)	EPBBF1	1030
CLAIMS B	(German)	EPBBF1	800
CLAIMS B	(French)	EPBBF1	808
SPEC B	(English)	EPBBF1	3603
Total word count - document A			0
Total word count - document B			6241
Total word count - documents A + B			6241

10/6/3 (Item 1 from file: 349)
00926672 **Image available**

MEDICAL SYSTEM AND METHOD FOR REMODELING AN EXTRAVASCULAR TISSUE STRUCTURE
METHODE ET SYSTEME MEDICAUX DE REMODELAGE D'UNE STRUCTURE TISSULAIRE
EXTRAVASCULAIRE

Publication Language: English
Filing Language: English
Fulltext Availability:
Detailed Description
Claims
Fulltext Word Count: 22792
Publication Year: 2002

10/6/4 (Item 2 from file: 349)
00894303

NUCLEIC ACIDS, PROTEINS, AND ANTIBODIES
ACIDES NUCLEIQUES, PROTEINES ET ANTICORPS

Publication Language: English
Filing Language: English
Fulltext Availability:
Detailed Description
Claims
Fulltext Word Count: 307140
Publication Year: 2002

10/6/5 (Item 3 from file: 349)
00890494 **Image available**

HEART ASSIST DEVICES, SYSTEMS AND METHODS
DISPOSITIFS, SYSTEMES ET PROCEDES D'ASSISTANCE CARDIAQUE

Publication Language: English
Filing Language: English
Fulltext Availability:

Detailed Description
Claims
Fulltext Word Count: 7453
Publication Year: 2002

10/6/6 (Item 4 from file: 349)
00867968

NUCLEIC ACIDS, PROTEINS, AND ANTIBODIES
ACIDES NUCLEIQUES, PROTEINES ET ANTICORPS

Publication Language: English
Filing Language: English
Fulltext Availability:
Detailed Description
Claims

Fulltext Word Count: 189075
Publication Year: 2002
?t10/3,k/3,5

10/3,K/3 (Item 1 from file: 349)
DIALOG(R) File 349:PCT FULLTEXT
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duplicate of 10/3,AB/8 in inventor search results

00926672 **Image available**

MEDICAL SYSTEM AND METHOD FOR REMODELING AN EXTRAVASCULAR TISSUE STRUCTURE
METHODE ET SYSTEME MEDICAUX DE REMODELAGE D'UNE STRUCTURE TISSULAIRE
EXTRAVASCULAIRE

Patent Applicant/Assignee:

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Patent and Priority Information (Country, Number, Date):

Patent: WO 200260352 A1 20020808 (WO 0260352)

Application: WO 2002US3136 20020130 (PCT/WO US0203136)

Priority Application: US 2001774869 20010130; US 2001265995 20010201

Designated States: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU
CZ (utility model) DE (utility model) DK (utility model) DM DZ EC EE
(utility model) ES FI (utility model) GB GD GE GH GM HR HU ID IL IN IS JP
KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PH
PL PT RO RU SD SE SG SI SK (utility model) SL TJ TM TN TR TT TZ UA UG UZ
VN YU ZA ZM ZW

(EP) AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE TR

(OA) BF BJ CF CG CI CM GA GN GQ GW ML MR NE SN TD TG

(AP) GH GM KE LS MW MZ SD SL SZ TZ UG ZM ZW

(EA) AM AZ BY KG KZ MD RU TJ TM

Publication Language: English

Filing Language: English

Fulltext Word Count: 22792

Fulltext Availability:
Detailed Description

Detailed Description

... a proximal port, or aperture 251, such that the rotational coupler 280 is adapted to **rotate** within and relative to the **prosthesis** 250. This relative **rotation** is converted to force a deflection of prosthesis 250 into the desired shape of the...coupling, the prosthesis 250 is preferably hold to resist rotation while rotational coupler 280 is **rotated** within the **prosthesis** 250. This may be achieved simply by frictional forces of surrounding tissue as prosthesis 250 is delivered

into the desired vessel such as the **coronary sinus**. According to another example, this may be achieved by providing a releasable interface such as a friction fit between outer member 215 and proximal end portion 252 of **prosthesis 250** wherein the frictional engagement of outer member 215 and **prosthesis 250** are held in a relatively fixed position while inner member 225 and rotational coupler 280 are **rotated**. This embodiment is shown in Figure 11A. In addition, or in the alternative ...

...According to this mode, a shaped proximal fitting 253 on the proximal end 252 of **prosthesis 250** is adapted to mate as a male counterpart into a shaped aperture or fitting...Additionally, one or more of the lumen may be used to permit irrigation to the **coronary sinus**, or other desired purposes.

With reference to Figures 21 and 22, the implant 402 is...401 from the implant 402.

Once the implant 402 has been desirably positioned within the **coronary sinus** by a suitable method, such as described above, the proximal handle 500 is **rotated** with respect to the distal handle 502 to cause **rotation** of the driver 436. **Rotation** of the driver 436 results in corresponding **rotation** of the screw 426 which, in turn, causes the **implant 402** to move from a delivery configuration to a remodeling configuration, as described in detail above. The direction of **rotation** of the proximal handle 500 will vary depending on the orientation of the threaded connection...

...However, if a right hand thread orientation is used, the proximal handle 500 will be **rotated** counter-clockwise to move the **implant 402** from a delivery configuration to a remodeling configuration.

When the implant 402 has achieved...

10/3,K/5 (Item 3 from file: 349)
DIALOG(R) File 349:PCT FULLTEXT
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00890494 **Image available**

HEART ASSIST DEVICES, SYSTEMS AND METHODS
DISPOSITIFS, SYSTEMES ET PROCEDES D'ASSISTANCE CARDIAQUE

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Patent and Priority Information (Country, Number, Date):

Patent: WO 200224255 A1 20020328 (WO 0224255)

Application: WO 2001AU1187 20010921 (PCT/WO AU0101187)

Priority Application: AU 2000312 20000922

Designated States: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU
CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP
KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ PH PL PT RO RU
SD SE SG SI SK SL TJ TM TR TT TZ UA UG US UZ VN YU ZA ZW

(EP) AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SI TR
(OA) BF BJ CF CG CI CM GA GN GQ GW ML MR NE SN TD TG
(AP) GH GM KE LS MW MZ SD SL SZ TZ UG ZW
(EA) AM AZ BY KG KZ MD RU TJ TM

Publication Language: English
Filing Language: English
Fulltext Word Count: 7453

Fulltext Availability:
Detailed Description

Detailed Description

... the device (to disable compressing of the aorta) and retention in the patient's thoracic **cavity** .

The **heart** assist device of the present invention allows, at least in preferred embodiments, partial unloading of. Additionally, the device does not require cardiopulmonary bypass for **implantation** and can therefore be **turned** on and off without significant patient risk.

After use, it is preferable for the device...

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File 348:EUROPEAN PATENTS 1978-2002/Dec W03

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File 349:PCT FULLTEXT 1979-2002/UB=20021226,UT=20021219

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Set	Items	Description
S1	134497	PROSTHES?S OR PROSTHETIC? OR STENT? ? OR IMPLANT? OR GRAFT- ??? OR APPLIANCE? ?
S2	837	(CORONARY OR CORONARIUS) (N) SINUS
S3	1885	(CAVITY OR SINUS) (5N) (HEART OR CARDIAC OR CORONARY)
S4	719216	ROTAT???? OR TWIST??? OR TURN??? OR REVOLV??? OR REVOLUTIO- N? ? OR PIVOT???
S5	731	IC=A61F-002/24
S6	1	S1(S)S2:S3(S)S4 AND S5
S7	55	S1(S)S2:S3(S)S4 NOT S6
S8	3755	S1(5N)S4
S9	3	S7(S)S8
S10	6	S7 AND S8

10979430 EMBASE No: 2001023394

Rationale and design of a randomized clinical trial to assess the safety and efficacy of cardiac resynchronization therapy in patients with advanced heart failure: The multicenter InSync randomized clinical evaluation (MIRACLE)

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Journal of Cardiac Failure (J. CARD. FAIL.) (United States) 2000, 6/4 (369-380)

CODEN: JCFAF ISSN: 1071-9164

DOCUMENT TYPE: Journal ; Article

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 38

Up to 50% of patients with chronic systolic heart failure have interventricular conduction delays, such as left bundle branch block, that result in abnormal electrical depolarization of the heart. Prolonged QRS duration results in abnormal interventricular septal wall motion, decreased contractility, reduced diastolic filling time, and prolonged duration of mitral regurgitation, which places the failing heart at a significant mechanical disadvantage. Prolonged QRS duration has been associated with poor outcome in heart failure patients. Atrial-synchronized, biventricular pacing or cardiac resynchronization therapy optimizes atrial-ventricular delay, narrows QRS duration, and seems promising in the management of advanced heart failure patients. Initial studies show improved quality of life and functional capacity compared with baseline or with no pacing. These studies, however, were either uncontrolled or poorly controlled, unblinded or only single-blinded, and enrolled small numbers of patients. The Multicenter InSync Randomized Clinical Evaluation (MIRACLE) is a large, prospective, randomized, double-blind, controlled trial designed to more definitively evaluate the clinical efficacy and safety of cardiac resynchronization for heart failure. The study is being completed in 3 phases (an initial pilot phase, a pivotal phase, and an expansion phase), enrolling 500 patients with New York Heart Association (NYHA) class III and IV systolic heart failure and QRS durations of 130 ms or more. Prospectively defined primary end points for the pivotal phase include evaluation of safety (implant success rate, freedom from stimulator- and ventricular-lead-related complications) and effects on functional status (quality of life, NYHA class, 6-minute hall walk distance) at 6 months. A variety of secondary end points will further define the efficacy and mechanism(s) of action of cardiac resynchronization in heart failure. The pivotal phase of MIRACLE will conclude in January 2001.

File 155:MEDLINE(R) 1966-2002/Nov W4
 File 5:Biosis Previews(R) 1969-2002/Dec W4
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 (c) 2002 Inst for Sci Info
 File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
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Set	Items	Description
S1	1624	AU='LANGBERG J' OR AU='LANGBERG J J' OR AU='LANGBERG J.' OR AU='LANGBERG J.J.' OR AU='LANGBERG JJ' OR D9 OR AU='LANGBERG JONATHAN' OR AU='LANGBERG JONATHAN J'
S2	493	AU='LESH M D' OR AU='LESH M.D.' OR AU='LESH MD' OR AU='LESH MICHAEL D'
S3	175	AU='LESH MICHAEL' OR AU='LESH MICHAEL D'
S4	12	AU='VAN DER BURG E' OR AU='VAN DER BURG E.' OR AU='VAN DER BURG ERIK' OR AU='VAN DER BURG ERIK J'
S5	0	S1 AND S2:S3 AND S4
S6	3198	ANNULOPLASTY OR ANULOPLASTY
S7	1	S1:S4 AND S6
S8	3837	MITRAL()ANNUL?
S9	86621	MITRAL()VALVE? ?
S10	32	S1:S4 AND S8:S9
S11	1097275	PROSTHE? OR IMPLANT??? OR STENT? ? OR GRAFT???
S12	1	S10 AND S11